# c 1 Filed 05/31/18 Entered 05/31/18 23:47:39 Desc Main Document Page 1 of 49 United States Bankruptcy Court Northern District of Illinois, Eastern Division Case 18-15842 Doc 1

|                                    | Case No   |
|------------------------------------|---|
|                                    | Chapter <b>7</b>  |
| Debtor(s)                          | •   |
| VERIFICATION OF CRI                | EDITOR MATRIX   |
|                                    | Number of Creditors   |
| verifies that the list of creditor | rs is true and correct to the best of my (our) knowledge.               |
| /s/ Ismael Diaz                    |   |
| Debtor                             |   |
|                                    |   |
|                                    |   |
|                                    | VERIFICATION OF CRI  verifies that the list of creditor  /s/Ismael Diaz |

Joint Debtor

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### United States Bankruptcy Court Northern District of Illinois, Eastern Division

| IN RE:                         |  | Case No.   |
|--------------------------------|--|--|
| Diaz, Ismael                   |  | Chapter 7  |
|                                | Debtor(s)                              | 1  |
|                                | VERIFICATION OF CRE                    | CDITOR MATRIX  |
|                                |  | Number of Creditors0                                     |
| The above-named Debtor(s) here | eby verifies that the list of creditor | s is true and correct to the best of my (our) knowledge. |
| Date: May 11, 2018             | /s/ Ismael Diaz Debtor                 |  |
|                                | Joint Debtor                           |  |

Advocate Trinity Hospital 2020 E 93rd St Chicago, IL 60617-3726

Capital One 11013 W Broad St Glen Allen, VA 23060-6017

CB/Victorias Secret PO Box 182128 Columbus, OH 43218-2128

DSNB Macys PO Box 8051 Mason, OH 45040-8051

Internal Revenue Service PO Box 21126 Centralized Insolvency Operation Philadelphia, PA 19114-0326

One Main Financial PO Box 3662 Evansville, IN 47735-3662

Sears/CBNA 13200 Smith Rd Cleveland, OH 44130-7802 SYNCB/WLMRTD PO Box 960024 Orlando, FL 32896-0024

Target/TD PO Box 673 Minneapolis, MN 55440-0673 B201B (Form 2018) (P2/09) -15842

Case No. (if known)

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Desc Main

Date

### Document Page 5 of 49 United States Bankruptcy Court

### Northern District of Illinois, Eastern Division

| IN RE:   |  | Case No.  |
|--|--|---|
| Diaz, Ismael   |  | Chapter 7   |
| Debtor(s)  |  | Chapter <u>r</u>  |
|  | ON OF NOTICE TO CONSUMER<br>§ 342(b) OF THE BANKRUPTCY ( |   |
| Certificate of   | [Non-Attorney] Bankruptcy Petition                       | n Preparer  |
| I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy |  | ify that I delivered to the debtor the attached   |
| Printed Name and title, if any, of Bankruptcy Pet Address:   | •  | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) |
| X  |  | (Required by 11 U.S.C. § 110.)  |
|  | Certificate of the Debtor                                |   |
| I (We), the debtor(s), affirm that I (we) have rece  | ived and read the attached notice, as requ               | ired by § 342(b) of the Bankruptcy Code.  |
| Diaz, Ismael   | X /s/ Ismael Diaz  | 5/11/2018   |
| Printed Name(s) of Debtor(s)   | Signature of Debto                                       | or Date   |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

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| Fill in t                      | his information to identi    | fy your case:         |  |   |
|--------------------------------|------------------------------|-----------------------|--|---|
| Debtor 1                       | Ismael Diaz                  |                       |  |   |
| - h ( 0                        | First Name                   | Middle Name           | Last Name  |   |
| Debtor 2<br>Spouse if, filing) | First Name                   | Middle Name           | Last Name  |   |
| Inited States Ba               | ankruptcy Court for the:     | NORTHERN DIS          | TRICT OF ILLINOIS, EASTERN DIVISION  |   |
| rinca Otatos Bi                | anitrapitoy Court for the.   | 1101111211112111      | THE CONTENT OF THE PROPERTY OF |   |
| Case number fknown)            |                              |                       |  | Chook if this is an                                 |
| ii Kilowii)                    |                              |                       |  | Check if this is an amended filing                  |
|                                |                              |                       |  | -   |
|                                | 100                          |                       |  |   |
| Official Fo                    | orm 108                      |                       |  |   |
| Stateme                        | nt of Intentio               | n for Indi            | viduals Filing Under Chapto  | er 7  |
|                                |                              |                       |  |   |
| you are an ind                 | lividual filing under chap   | pter 7, you must fill | out this form if:  |   |
| creditors hav                  | e claims secured by you      | ur property, or       |  |   |
| you have leas                  | sed personal property a      | and the lease has no  | ot expired.  |   |
| ou must file th                | is form with the court wi    | ithin 30 days after   | you file your bankruptcy petition or by the date set f   |   |
|                                | •                            | e court extends the   | e time for cause. You must also send copies to the c   | reditors and lessors you list on                    |
| the for                        | rm                           |                       |  |   |
| two married po                 | eople are filing together    | in a joint case, bot  | th are equally responsible for supplying correct info  | rmation. Both debtors must sign                     |
| and da                         | ate the form.                | -                     |  | _   |
| e as complete                  | and accurate as nossible     | le If more snace is   | needed, attach a separate sheet to this form. On the   | ton of any additional pages                         |
|                                | our name and case num        |                       | needed, attach a separate sheet to this form. On the   | top of any additional pages,                        |
|                                |                              | ,                     |  |   |
| Part 1: List Y                 | our Creditors Who Have       | e Secured Claims      |  |   |
| For any credit                 | tors that you listed in Pa   | art 1 of Schedule D   | : Creditors Who Have Claims Secured by Property (  | Official Form 106D), fill in the                    |
| information b                  |                              |                       |  | 511   |
| Identify the ci                | reditor and the property the | hat is collateral     | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |
|                                |                              |                       |  |   |
| Creditor's                     |                              |                       | ☐ Surrender the property.  | □ No  |
| name:                          |                              |                       | ☐ Retain the property and redeem it.   |   |
| Description of                 | f                            |                       | Retain the property and enter into a Reaffirmation   | ☐ Yes   |
| property                       | ı                            |                       | Agreement.   |   |
| securing debt                  |                              |                       | ☐ Retain the property and [explain]:   |   |
| Scouring debt                  | •                            |                       |  | _   |
| Creditor's                     |                              |                       | ☐ Surrender the property.  | □ No  |
| name:                          |                              |                       | Retain the property and redeem it.   |   |
|                                |                              |                       | ☐ Retain the property and enter into a <i>Reaffirmation</i>  | ☐ Yes   |
| Description of                 | f                            |                       | Agreement.   |   |
| property                       |                              |                       | ☐ Retain the property and [explain]:   |   |
| securing debt                  |                              |                       |  | _   |
| Creditor's                     |                              |                       | По ни  | П.,   |
|                                |                              |                       | ☐ Surrender the property.  | □ No  |
| name:                          |                              |                       | Retain the property and redeem it.   | ☐ Yes   |
| Description of                 | f                            |                       | ☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement.   | <b>—</b> 103  |
| Describition of                |                              |                       |  |   |

Official Form 108

Creditor's

securing debt:

☐ Surrender the property.

☐ No

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| Debtor 1              | Diaz, Ismael                          | Case number (if known)   |  |
|-----------------------|---------------------------------------|--|--|
| name:                 |                                       | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a <i>Reaffirmation</i></li></ul>                   | □Yes   |
| Descrip               | ption of                              | Agreement.   |  |
| propert               | ry .                                  | ☐ Retain the property and [explain]:   |  |
| securin               | ng debt:                              |  | -  |
| For any un            | nation below. Do not list real estate | hat you listed in Schedule G: Executory Contracts and Unexpired L<br>leases. Unexpired leases are leases that are still in effect; the lease | eases (Official Form 106G), fill in<br>period has not yet ended. You |
| may assu              | me an unexpired personal property     | / lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).  |  |
| Describe              | your unexpired personal property      | leases   | Will the lease be assumed?   |
| Lessor's r            |                                       |  | □ No   |
| Property:             | on of leased                          |  | ☐ Yes  |
| Lessor's r            | name:                                 |  | □ No   |
|                       | on of leased                          |  |  |
| Property:             |                                       |  | ☐ Yes  |
| Lessor's r            | name:                                 |  | □ No   |
| Description Property: | on of leased                          |  | ☐ Yes  |
| Lessor's r            |                                       |  | □ No   |
| Property:             | on of leased                          |  | ☐ Yes  |
| Lessor's r            |                                       |  | □ No   |
| Description Property: | on of leased                          |  | ☐ Yes  |
| Lessor's r            |                                       |  | □ No   |
| Description Property: | on of leased                          |  | ☐ Yes  |
| Lessor's r            |                                       |  | □ No   |
| Description Property: | on of leased                          |  | ☐ Yes  |
| Part 3:               | Sign Below                            |  |  |
| Under per             |                                       | e indicated my intention about any property of my estate that secu<br>e.   | res a debt and any personal  |
| ,                     | smael Diaz                            | •  |  |
| Ism                   | iael Diaz<br>nature of Debtor 1       | Signature of Debtor 2  |  |
| Date                  | May 11, 2018                          | Date   |  |

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| Debtor 1 Diaz, Ismael   | Case number(if known)  |
|---|--|
| name:  Description of property  | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation         Agreement.</li> <li>□ Retain the property and [explain];</li> </ul>  |
| securing debt:  | — Netali tie property and [explain].   |
| Part 2: List Your Unexpired Personal Pe   | onerty   eases   |
| For any unexpired personal property lease<br>the information below. Do not list real esta | that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in<br>te leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You<br>rty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |
| Describe your unexpired personal proper   | y leases   Will the lease be assumed?  |
| Lessor's name: Description of leased  | □ No   |
| Property:   | ☐ Yes  |
| Lessor's name:  | □ No   |
| Description of leased<br>Property:  | ☐ Yes  |
| Lessor's name:  | □ No   |
| Description of leased<br>Property:  | ☐ Yes  |
| Lessor's name:  | □ No   |
| Description of leased<br>Property:  | ☐ Yes  |
| Lessor's name:  | □ No   |
| Description of leased<br>Property:  | □ Yes  |
| Lessor's name:  | □ No   |
| Description of leased<br>Property:  | □ Yes  |
| Lessor's name:  | □ No   |
| Description of leased Property:   | ☐ Yes  |
| , ,   | Li fes   |
| Part 3: Sign Below  | re indicated my intention about any preparity of my active that accuracy date and  |
| property that is subject to an unexpired lea  | ve indicated my intention about any property of my estate that secures a debt and any personal se.   |
| X /s/ Ismael Diaz   | X<br>Signature of Debter 2   |
| Ismael Diaz Signature of Debtor 1   | Signature of Debtor 2  |
| Date May 11, 2018   | Date   |

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| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION |                               |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself   |                                       |   |
|-----|--|---------------------------------------|---|
|     |  | About Debtor 1:                       | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name   |                                       |   |
|     | Write the name that is on  | Ismael                                |   |
|     | your government-issued<br>picture identification (for<br>example, your driver's  | First name                            | First name                                    |
|     | license or passport).  | Middle name                           | Middle name                                   |
|     | Bring your picture   | Diaz                                  |   |
|     | with the trustee.  | Ulaz Substitution (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
|     |  |                                       |   |
| 2.  | All other names you have used in the last 8 years  |                                       |   |
|     | Include your married or maiden names.  |                                       |   |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-4193                           |   |
|     |  |                                       |   |

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| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   I have not used any business name or EINs.  Business name(s)  |  |  |
|---|---|---|---|--|--|
|   |   | ■ I have not used any business name or EINs.  Business name(s)  |   |  |  |
|   |   | LING  |   |  |  |
| 5.  | Where you live  | 10438 S Avenue N  | If Debtor 2 lives at a different address:   |  |  |
|   |   | Chicago, IL 60617  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code  |  |  |
|   |   | Cook<br>County  | County  |  |  |
|   |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |  |  |
|   |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |
| 6.  | Why you are choosing this district to file for bankruptcy | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |  |  |
|   |   |   |   |  |  |

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Document Debtor 1 Diaz, Ismael

| Par | Tell the Court About Y   | our l  | Bankruptcy Cas                     | se  |   |   |            |
|-----|--|--|------------------------------------|---|---|---|------------|
| 7.  | The chapter of the Bankruptcy Code you are   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12 |                                    |   |   |   |            |
|     | choosing to file under   |  |                                    |   |   |   |            |
|     |  |  |                                    |   |   |   |            |
|     |  |  |                                    |   |   |   |            |
|     |  |  | Chapter 13                         |   |   |   |            |
|     |  |  |                                    |   |   |   |            |
| 8.  | 3. How you will pay the fee  |  | about how you                      | u may pay. Typica<br>y is submitting yo       | ally, if you are paying the fee yours                               | with the clerk's office in your local court for more d<br>self, you may pay with cash, cashier's check, or mo<br>attorney may pay with a credit card or check with a                |            |
|     |  |  |                                    | the fee in insta                              |   | , sign and attach the Application for Individuals to I  | Pay The    |
|     |  |  | not required to<br>your family siz | o, waive your fee,<br>ze and you are un       | and may do so only if your incomable to pay the fee in installments | only if you are filing for Chapter 7. By law, a judge r<br>e is less than 150% of the official poverty line that a<br>). If you choose this option, you must fill out the <i>Ap</i> | applies to |
|     |  |  | to Have the C                      | napter / Filing F                             | ee Waived (Official Form 103B) a                                    | and file it with your petition.   |            |
| 9.  | Have you filed for bankruptcy within the last 8 years?   | ■ N  |                                    |   |   |   |            |
|     |  |  | District                           |   | When  | Case number   |            |
|     |  |  | District                           |   | When  | Case number   |            |
|     |  |  | District                           |   | When  | Case number   |            |
| 10. | Are any bankruptcy cases   | ■ N  |                                    |   |   |   |            |
|     | pending or being filed by<br>a spouse who is not filing<br>this case with you, or by<br>a business partner, or by<br>an affiliate? |  |                                    |   |   |   |            |
|     |  |  | Debtor                             |   |   | Relationship to you   |            |
|     |  |  | District                           |   | When  | Case number, if known   |            |
|     |  |  | Debtor                             |   |   | Relationship to you   |            |
|     |  |  | District                           |   | When  | Case number, if known   |            |
| 11. | Do you rent your   |  | No. Go to li                       | ine 12.                                       |   |   |            |
|     | residence?   | ■ Y  | es. Has yo                         | ur landlord obtai                             | ned an eviction judgment agains                                     | t you?  |            |
|     |  |  | •                                  | No. Go to line 1                              | 2.  |   |            |
|     |  |  |                                    | Yes. Fill out <i>Initia</i> bankruptcy petiti |   | udgment Against You (Form 101A) and file it with t  | his        |

| Deb                            | tor 1                  | Diaz, Ismael   |                        |  | Document F                      | Page 12 of 49 Case number (if known)  |  |  |
|--------------------------------|------------------------|--|------------------------|--|---------------------------------|---|--|--|
| Par                            | t 3:                   | Report About Any Bus   | sinesses `             | You Own  | as a Sole Proprietor            |   |  |  |
| 12.                            | of ar                  | you a sole proprietor<br>ny full- or part-time<br>ness?  | ■ No.                  | Go to  | Part 4.                         |   |  |  |
|                                |                        |  | ☐ Yes.                 | Name   | and location of business        |   |  |  |
|                                | busir<br>indiv<br>sepa | e proprietorship is a<br>ness you operate as an<br>idual, and is not a<br>rate legal entity such as<br>poration, partnership,<br>.C. |                        | Name   | of business, if any             |   |  |  |
|                                | sole                   | u have more than one<br>proprietorship, use a<br>rate sheet and attach it  |                        | Numb   | er, Street, City, State & ZIP C | ode   |  |  |
|                                | to thi                 | s petition.  |                        | Chec   | the appropriate box to descri   | •   |  |  |
|                                |                        |  |                        |  |                                 | fined in 11 U.S.C. § 101(27A))  |  |  |
|                                |                        |  |                        |  | Single Asset Real Estate (as    | defined in 11 U.S.C. § 101(51B))  |  |  |
|                                |                        |  |                        |  | Stockbroker (as defined in 1    | U.S.C. § 101(53A))  |  |  |
|                                |                        |  |                        |  | Commodity Broker (as define     | ed in 11 U.S.C. § 101(6))   |  |  |
|                                |                        |  |                        |  | None of the above               |   |  |  |
| Chapter<br>Bankrup<br>you a sn |                        | you filing under oter 11 of the kruptcy Code and are a small business or?  | deadlines<br>operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B). |                                 |   |  |  |
|                                |                        | a definition of small  | ■ No.                  | I am r   | ot filing under Chapter 11.     |   |  |  |
|                                |                        | business debtor, see 11 U.S.C. § 101(51D).   |                        | I am f<br>Code   | •                               | m NOT a small business debtor according to the definition in the Bankruptcy   |  |  |
|                                |                        |  | ☐ Yes.                 | I am f   | ling under Chapter 11 and I a   | m a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| Par                            | t 4:                   | Report if You Own or I   | Have Any               | Hazardo  | us Property or Any Property     | That Needs Immediate Attention  |  |  |
| 14.                            | Do y                   | ou own or have any   | ■ No.                  |  |                                 |   |  |  |
|                                |                        | erty that poses or is<br>jed to pose a threat of   |                        |  |                                 |   |  |  |
|                                | imm                    | inent and identifiable   | <b>—</b> 163.          | What is  | he hazard?                      |   |  |  |
|                                |                        | ty? Or do you own  |                        | If immed   | iate attention is               |   |  |  |

any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Diaz, Ismael

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 14 of 49 Case number (if known) Debtor 1 Diaz, Ismael **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities to □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ismael Diaz Signature of Debtor 2 Ismael Diaz Signature of Debtor 1 Executed on Executed on May 11, 2018

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Diaz, Ismael Document Page 15 of 49 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Karen Walin                        | Date          | May 11, 2018               |
|--|---------------|----------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY             |
|  |               |                            |
| Karen Walin                            |               |                            |
| Printed name                           |               |                            |
| Chicago Legal, LLC                     |               |                            |
| Firm name                              |               |                            |
|  |               |                            |
| 903 Commerce Dr Ste 165                |               |                            |
| Oak Brook, IL 60523-8727               |               |                            |
| Number, Street, City, State & ZIP Code |               |                            |
| (700) 705 7000                         |               |                            |
| Contact phone (708) 795-7000           | Email address | kwalin@chicagolegalllc.com |
| 6192832                                |               |                            |
| Bar number & State                     |               |                            |

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| Del  | otor 1 Diaz, Ismael  |   |  |  | Case numbe   | er (if known)   |      |
|------|--|---|--|--|--|---|------|
| Par  | t 6: Answer These Quest  | ions for R                              | eporting Purposes  |  |  |   |      |
| 16.  | What kind of debts do you have?                                      | 16a.                                    | Are your debts primari<br>individual primarily for a                 | ily consumer debts?<br>personal, family, or ho | Consumer debts are define ousehold purpose."   | ned in 11 U.S.C.§ 101(8) as "incurred by an   | 1    |
|      |  |   | ☐ No. Go to line 16b.  |  |  |   |      |
|      |  |   | Yes. Go to line 17.  |  |  |   |      |
|      |  | 16b.                                    |  |  | Business debts are debts the eration of the business or in   | nat you incurred to obtain money vestment.  |      |
|      |  |   | ☐ No. Go to line 16c.  |  |  |   |      |
|      |  |   | ☐ Yes. Go to line 17.  |  |  |   |      |
|      |  | 16c.                                    | State the type of debts yo   | ou owe that are not co                         | nsumer debts or business of  | debts   |      |
| 17.  | Are you filing under<br>Chapter 7?                                   | □ No.                                   | l am not filing under Cha  | apter 7. Go to line 18.                        |  |   |      |
|      | Do you estimate that after<br>any exempt property is<br>excluded and | ■ Yes.                                  | I am filing under Chapter<br>paid that funds will be av              |  |  | y is excluded and administrative expenses a   | re   |
|      | administrative expenses are pald that funds will be                  |   | ■ No   |  |  |   |      |
|      | avallable for distribution to unsecured creditors?                   |   | ☐ Yes  |  |  |   |      |
| 18.  | How many Creditors do you estimate that you owe?                     | ■ 1-49<br>□ 50-99<br>□ 100-1<br>□ 200-9 | 99   | □ 1,000<br>□ 5001-<br>□ 10,00                  | 10,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000   |      |
| 19.  | How much do you estimate your assets to be worth?                    | □ \$100,                                | 550,000<br>101 - \$100,000<br>.001 - \$500,000<br>.001 - \$1 million | □ \$10,00<br>□ \$50,00                         | 0,001 - \$10 million<br>00,001 - \$50 million<br>00,001 - \$100 million<br>000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |      |
| 20.  | How much do you<br>estimate your liabilities to<br>be?               | □ \$100,                                | :50,000<br>001 - \$100,000<br>001 - \$500,000<br>001 - \$1 million   | □ \$10,00<br>□ \$50,00                         | 0,001 - \$10 million<br>00,001 - \$50 million<br>00,001 - \$100 million<br>000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |      |
| Part | 7: Sign Below  |   |  |  |  |   | •    |
| For  | you  | I have ex                               | amined this petition, and I  | declare under penalty                          | of perjury that the information  | on provided is true and correct.  |      |
|      |  | If I have<br>States Co                  | chosen to file under Chaptode. I understand the relief               | ter 7, I am aware that<br>available under each | t I may proceed, if eligible,<br>chapter, and I choose to pro                                      | under Chapter 7, 11,12, or 13 of title 11, U<br>oceed under Chapter 7.  | nite |
|      |  |   | rney represents me and I d<br>ained and read the notice re           |  |  | attorney to help me fill out this document, I   |      |
|      |  | I request                               | relief in accordance with t  | the chapter of title 11                        | , United States Code, spec   | ified in this petition.   |      |
|      |  | case can                                | result in fines up∫to \$250,0<br>ael Diaz                            |  | for up to 20 years, or both.   | operty by fraud in connection with a bankru<br>18 U.S.C. §§ 152, 1341, 1519, and 3571.                                    | ptcy |
|      |  | <b>Ismael</b><br>Signature              | Diaz<br>e of Debtor 1  | 1  | Signature of Debtor  | 12  |      |
|      |  | Executed                                | on May 11, 2018  |  | Executed on  |   | ٠.   |
|      |  |   | MM (DD (VVVV   |  |  | /DD /XXXX   | -    |

|                      |   | Documen  | t Page 17 of 49  |  |
|----------------------|---|--|--|--|
| Fill in th           | is information to iden                              | tify your case and this filing:                                |  |  |
| Debtor 1             | Ismael Diaz   |  |  |  |
| Debtor 2             | First Name  | Middle Name  | Last Name  |  |
| (Spouse, if filing)  | First Name  | Middle Name  | Last Name  |  |
| United States Ba     | nkruptcy Court for the:                             | NORTHERN DISTRICT OF   | ILLINOIS, EASTERN DIVISION   |  |
| Case number          |   |  |  | ☐ Check if this is an  |
|                      |   |  |  | amended filing   |
|                      |   |  |  |  |
| Official Fo          | rm 106A/B   |  |  |  |
| _                    | e A/B: Pro  | nertv  |  | 12/15  |
|                      |   | <u> </u>   | e. If an asset fits in more than one category, list the  |  |
| hink it fits best. B | e as complete and accur<br>e space is needed, attac | rate as possible. If two married pe                            | eople are filing together, both are equally responsib<br>On the top of any additional pages, write your name | le for supplying correct                                     |
| Part 1: Describe     | Each Residence, Buildir                             | ng, Land, or Other Real Estate Yo                              | ou Own or Have an Interest In  |  |
| . Do you own or h    | nave any legal or equitab                           | ole interest in any residence, build                           | ding, land, or similar property?   |  |
| No. Go to Par        | t 2.  |  |  |  |
| ☐ Yes. Where is      | s the property?                                     |  |  |  |
| Part 2: Describe     | Your Vehicles                                       |  |  |  |
| Someone else drivi   | es. If you lease a vehicle                          |  | es, whether they are registered or not? Include<br>Executory Contracts and Unexpired Leases.                 | any venicies you own that                                    |
| ☐ Yes                |   |  |  |  |
|                      |   |  | rehicles, other vehicles, and accessories snowmobiles, motorcycle accessories                                |  |
| ■ No                 |   |  |  |  |
| ☐ Yes                |   |  |  |  |
|                      |   |  |  |  |
| 5 Add the dolla      | r value of the portion                              | vou own for all of your entrie                                 | es from Part 2, including any entries for pages  |  |
|                      |   |  |  | \$0.00   |
| Danish a             | V D 11  | and ald Harry  |  |  |
|                      | Your Personal and Hounave any legal or equi         | itable interest in any of the fo                               | llowing items?   | Current value of the   |
|                      |   |  | <b>3</b> ***   | portion you own? Do not deduct secured claims or exemptions. |
| Examples: Ma         | ,   | e, linens, china, kitchenware                                  |  | ciains of exemptions.  |
| Yes. Descri          |   | e and household goods  |  | \$1,300.00   |
|                      | - 4111141   |  |  |  |
| •                    |   | dio, video, stereo, and digital equences, media players, games | uipment; computers, printers, scanners; music col  | lections; electronic devices                                 |

☐ Yes. Describe.....

| D  | ebtor 1                    | Diaz, Ismael  | Document  | Page 18 of 49 Case number                | (if known)     |   |
|----|----------------------------|---|---|--|----------------|---|
| 8. |                            | les of value  | ; paintings, prints, or other artwork; books  | s, pictures, or other art objects; stamp | o, coin, or ba | seball card collections; other  |
|    | ■ No<br>□ Yes.             | Describe  |   |  |                |   |
| 9. | Example No                 | instruments   | ies<br>exercise, and other hobby equipment; bic                                       | ycles, pool tables, golf clubs, skis; ca | anoes and ka   | nyaks; carpentry tools; musical   |
| 10 | ☐ Yes.<br>. <b>Firearm</b> | Describe  |   |  |                |   |
|    | Examp ■ No                 |   | ins, ammunition, and related equipment  |  |                |   |
| 11 | □ No                       | les: Everyday clothes, fur                            | s, leather coats, designer wear, shoes, ac  | ccessories                               | ٦              | \$200.00  |
| _  |                            | Debt  | or's personal clothing  |  |                | \$200.00  |
| 12 | ■ No                       |   | stume jewelry, engagement rings, wedding  | g rings, heirloom jewelry, watches, ge   | ems, gold, si  | ver   |
| 13 | Examp ■ No                 | <b>m animals</b><br><i>les:</i> Dogs, cats, birds, ho | rses  |  |                |   |
|    | ☐ Yes.                     | Describe  |   |  |                |   |
| 14 | ■ No                       | er personal and house Give specific information       | hold items you did not already list, inc  | cluding any health aids you did no       | ot list        |   |
|    |                            | Civo opcomo imormanon                                 |   |  | _              |   |
| 15 |                            |   | your entries from Part 3, including an  |  | hed for        | \$1,500.00  |
| P: | art 4: Des                 | scribe Your Financial Asso                            | ate   |  |                |   |
|    |                            |   | equitable interest in any of the following  | ng?                                      |                | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16 | ■ No                       |   | our wallet, in your home, in a safe deposit   | , ,                                      | petition       |   |
| 17 | Examp<br>_                 |   | r other financial accounts; certificates of cave multiple accounts with the same inst |  | erage house    | s, and other similar  |
|    | □ No<br>■ Yes              |   | Institution n   | ame:                                     |                |   |

\$50.00

17.1. Checking Account First Midwest Bank

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8.

9.

Case 18-15842 Doc 1 Filed 05/31/18 Entered 05/31/18 23:47:39 Desc Main Document Page 19 of 49 Debtor 1 Case number (if known) Diaz, Ismael 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

28. Tax refunds owed to you

No

Money or property owed to you?

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Current value of the portion you own?
Do not deduct secured claims or exemptions.

☐ Yes. Give specific information about them...

| De  | ebtor 1                | Diaz, Ismael  | Document                           | Page 20 of 49  Case number (if known)                    |                                |
|-----|------------------------|---|------------------------------------|--|--------------------------------|
|     |                        |   |                                    |  |                                |
| 29. |                        | support  bles: Past due or lump sum alimor  | ny, spousal support, child suppo   | ort, maintenance, divorce settlement, property           | settlement                     |
|     | ■ No                   | ·   |                                    |  |                                |
|     | ☐ Yes.                 | Give specific information   |                                    |  |                                |
|     |                        |   |                                    |  |                                |
| 30. |                        | amounts someone owes you  |                                    |  |                                |
|     | Exam                   | oles: Unpaid wages, disability insulungated loans you made to see                     |                                    | its, sick pay, vacation pay, workers' compensat          | ion, Social Security benefits; |
|     | ■ No                   | unpaid iodilo you mado to o   |                                    |  |                                |
|     | ☐ Yes.                 | Give specific information   |                                    |  |                                |
| 24  | Interco                | to in incurence nellales  |                                    |  |                                |
| 31. |                        | i <b>ts in insurance policies</b><br>o <i>les:</i> Health, disability, or life insura | ance; health savings account (HS   | SA); credit, homeowner's, or renter's insurance          |                                |
|     | ■ No                   |   |                                    |  |                                |
|     | ☐ Yes.                 | Name the insurance company of e   |                                    | D (1)  |                                |
|     |                        | Company   | name:                              | Beneficiary:   | Surrender or refund<br>value:  |
| 00  | <b>.</b> •             | toward by many and other than the   |                                    |  |                                |
| 32. |                        | terest in property that is due yo<br>are the beneficiary of a living trust,           |                                    | a<br>rance policy, or are currently entitled to receive; | property because someone has   |
|     | died.                  | , ,   |                                    | , ,,   | ,                              |
|     | ■ No                   |   |                                    |  |                                |
|     | ☐ Yes.                 | Give specific information   |                                    |  |                                |
| 22  | Claims                 | against third parties, whother  | or not you have filed a laweuit    | or made a demand for payment                             |                                |
| 55. |                        | ples: Accidents, employment disp  |                                    |  |                                |
|     | ■ No                   |   |                                    |  |                                |
|     | ☐ Yes.                 | Describe each claim   |                                    |  |                                |
| 34. | Other of               | contingent and unliquidated cla   | ims of every nature, including     | counterclaims of the debtor and rights to s              | et off claims                  |
|     | ■ No                   |   | •                                  | ·  |                                |
|     | ☐ Yes.                 | Describe each claim   |                                    |  |                                |
| 35. | Any fin                | nancial assets you did not alread   | dv list                            |  |                                |
|     | ■ No                   | ,   | •                                  |  |                                |
|     | ☐ Yes.                 | Give specific information   |                                    |  |                                |
|     |                        |   |                                    |  |                                |
| 36  |                        |   |                                    | y entries for pages you have attached for                | \$50.00                        |
|     | ı art -                | +. Write that number here   |                                    |  | <u> </u>                       |
| Pa  | rt 5: De               | scribe Any Business-Related Prope   | erty You Own or Have an Interest   | In. List any real estate in Part 1.                      |                                |
| 27  | Dovou                  | own or have any logal or equitable i  | nterest in any business related n  | ronortu?   |                                |
|     | •                      | own or have any legal or equitable i<br>o to Part 6.                                  | interest in any business-related p | roperty :  |                                |
|     |                        | Go to line 38.  |                                    |  |                                |
| •   |                        | 50 10 11110 001   |                                    |  |                                |
|     |                        |   |                                    |  |                                |
| Pa  |                        | scribe Any Farm- and Commercial look out own or have an interest in farmland          |                                    | n or Have an Interest In.                                |                                |
| 16  | Do you                 | Lown or have any local or equit   | able interest in any farm, or c    | ommercial fishing-related property?                      |                                |
| 40. |                        | Go to Part 7.   | able interest in any farin- or c   | onlinercial rishing-related property?                    |                                |
|     | _                      | Go to line 47.  |                                    |  |                                |
|     | 163                    | 55 to mio 17.   |                                    |  |                                |
| Pa  | rt 7:                  | Describe All Property You Own o   | r Have an Interest in That You Die | d Not List Above   |                                |
|     |                        | _ zaaz roporty rou own o  |                                    | <del></del>  |                                |
| 53. |                        | have other property of any kin  |                                    |  |                                |
|     | Exam <sub>i</sub> ■ No | oles: Season tickets, country club  | ιπειπρεισιήρ                       |  |                                |
|     |                        | Give specific information   |                                    |  |                                |

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Debtor 1 Diaz, Ismael

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 55. \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 57. Part 3: Total personal and household items, line 15 \$1,500.00 Part 4: Total financial assets, line 36 \$50.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$1,550.00 \$1,550.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$1,550.00

Official Form 106A/B Schedule A/B: Property page 5

|                           |  |   | Document  |                             | Page 22 of 49   | _  |   |
|---------------------------|--|---|---|-----------------------------|---|--|---|
|                           | Fill in thi                                      | is information to identif   | y your case:  |                             |   |  |   |
| De                        | btor 1   | Ismael Diaz   |   |                             |   |  |   |
| _                         |  | First Name  | Middle Name   | L                           | Last Name   | }  |   |
|                           | btor 2<br>ouse if, filing)                       | First Name  | Middle Name   |                             | _ast Name   |  |   |
| Un                        | ited States Ba                                   | inkruptcy Court for the:  | NORTHERN DISTRICT OF  | ILLIN                       | OIS, EASTERN DIVISION   |  |   |
| Ca                        | se number  |   |   |                             |   |  |   |
| (if k                     | nown)  |   |   |                             |   |  | Check if this is an amended filing  |
| Oi                        | fficial Fo                                       | rm 106C   |   |                             |   |  |   |
| S                         | chedul   | e C: The Pro  | operty You Cla  | ıim                         | as Exempt   |  | 4/16  |
| orop<br>out               | perty you listed                                 | on Schedule A/B: Prope  | erty (Official Form 106A/B) as yo   | our sou                     | r, both are equally responsible for su<br>urce, list the property that you claim a<br>ary. On the top of any additional page  | as exempt. If                              | more space is needed, fill  |
| spe<br>app<br>fun<br>to a | cific dollar ar<br>dicable statut<br>ds—may be u | nount as exempt. Alterr<br>ory limit. Some exempt<br>inlimited in dollar amou<br>ollar amount and the val | natively, you may claim the for<br>ions—such as those for heal<br>int. However, if you claim an | ull fair<br>Ith aid<br>exem | unt of the exemption you claim. O<br>market value of the property beir<br>s, rights to receive certain benefit<br>ption of 100% of fair market value<br>o exceed that amount, your exem | ng exempte<br>ts, and tax-e<br>under a lav | d up to the amount of any<br>exempt retirement<br>v that limits the exemption |
| Pa                        | rt 1: Identi                                     | fy the Property You Cla   | im as Exempt  |                             |   |  |   |
| 1.                        | Which set of                                     | f exemptions are you cl   | aiming? Check one only, ever  | ı if yoı                    | ır spouse is filing with you.   |  |   |
|                           | You are cla                                      | aiming state and federal n  | nonbankruptcy exemptions. 11  | USC                         | : 8 522(b)(3)   |  |   |
|                           | _  | aiming federal exemptions   | . , .   | 0.0.0                       | . 3 0==(0)(0)   |  |   |
| 2                         |  |   |   |                             | iil in the information below  |  |   |
| ۷.                        |  |   | ule A/B that you claim as exe   | • •                         |   | 0  | that all  |
|                           |  | ion of the property and ling that lists this property   | e on Current value of the<br>portion you own  | Am                          | ount of the exemption you claim   | эрестіс іа                                 | ws that allow exemption   |
|                           |  |   | Copy the value from<br>Schedule A/B   | Che                         | eck only one box for each exemption.  |  |   |
|                           |  | and household good  | \$1,300.00  |                             |   | 735 ILC                                    | S 5/12-1001(b)  |
|                           | Line from Sci                                    | hedule A/B. <b>6.1</b>  |   |                             | 100% of fair market value, up to any applicable statutory limit   |  |   |
|                           | Debtor's p                                       | ersonal clothing  | \$200.00  |                             |   | 735 ILC                                    | S 5/12-1001(b)  |
|                           | Line from Sci                                    | hedule A/B: <b>11.1</b>   |   |                             | 100% of fair market value, up to any applicable statutory limit   |  |   |
|                           |  |   |   |                             |   |  |   |
|                           | First Midw                                       |   | \$50.00   |                             |   | 735 ILC                                    | S 5/12-1001(b)  |
|                           | Line from Sci                                    | hedule A/B: <b>17.1</b>   |   |                             | 100% of fair market value, up to any applicable statutory limit   |  |   |
| 3.                        | (Subject to ac                                   | djustment on 4/01/19 and  | , ,   | es filed                    | d on or after the date of adjustment.) 5 days before you filed this case?   |  |   |

|                     |                            | 17(7(.1111))      | 111 11111. 7 3 111 4.    | 1      |
|---------------------|----------------------------|-------------------|--------------------------|--------|
| Fill in th          | nis information to identif | y your case:      |                          |        |
| Debtor 1            | Ismael Diaz                |                   |                          |        |
|                     | First Name                 | Middle Name       | Last Name                |        |
| Debtor 2            |                            |                   |                          |        |
| (Spouse if, filing) | First Name                 | Middle Name       | Last Name                |        |
| United States Ba    | ankruptcy Court for the:   | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIV | /ISION |
| Case number         |                            |                   |                          |        |
| (if known)          |                            |                   |                          |        |
|                     |                            |                   |                          |        |

### Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

|        |                 |   | Documei                      | nt Page            | 24 of 4             | 49                        | •                        |                       |
|--------|-----------------|---|------------------------------|--------------------|---------------------|---------------------------|--------------------------|-----------------------|
| F      | ill in this in  | formation to identify your cas  | se:                          |                    |                     |                           |                          |                       |
| Deb    | otor 1          | Ismael Diaz   |                              |                    |                     |                           |                          |                       |
| Der    | 101 1           | First Name  | Middle Name                  | Last Nar           | ne                  |                           |                          |                       |
| Deb    | otor 2          |   |                              |                    |                     |                           |                          |                       |
| (Spo   | use if, filing) | First Name  | Middle Name                  | Last Nar           | ne                  |                           |                          |                       |
| Uni    | ted States B    | ankruptcy Court for the: NC   | RTHERN DISTRICT              | OF ILLINOIS, F     | ASTERNI             | DIVISION                  |                          |                       |
| 0      | iou Otatoo B    |   |                              | <u> </u>           |                     |                           |                          |                       |
|        | e number        |   |                              |                    |                     |                           |                          |                       |
| (if kn | own)            |   |                              |                    |                     |                           |                          | if this is an         |
|        |                 |   |                              |                    |                     |                           | ameno                    | ded filing            |
| ∩ff    | icial For       | m 106E/F  |                              |                    |                     |                           |                          |                       |
|        |                 |   | Have Uneseu                  | rad Claim          |                     |                           |                          | 12/15                 |
|        |                 | E/F: Creditors Who  |                              |                    |                     |                           |                          |                       |
|        |                 | nd accurate as possible. Use Part<br>ntracts or unexpired leases that o         |                              |                    |                     |                           |                          |                       |
| Sche   | dule G: Exec    | cutory Contracts and Unexpired L  | eases (Official Form 10      | 6G). Do not inclu  | ide any cre         | ditors with partially se  | ecured claims that a     | re listed in Schedule |
|        |                 | Have Claims Secured by Propert<br>Page to this page. If you have no             |                              |                    |                     |                           |                          |                       |
|        | number (if k    |   | mornation to report in       | a rait, do not n   | ie tilat i ait.     | . On the top of any au    | uitional pages, write    | your name and         |
| Par    | t 1: List       | All of Your PRIORITY Unsecu   | red Claims                   |                    |                     |                           |                          |                       |
| 1.     | Do any credi    | itors have priority unsecured clair   | ms against you?              |                    |                     |                           |                          |                       |
|        | ☐ No. Go to     | Part 2.   |                              |                    |                     |                           |                          |                       |
|        | Yes.            |   |                              |                    |                     |                           |                          |                       |
| 2      |                 | ur priority unsecured claims. If a  | creditor has more than or    | ne priority upsecu | red claim lis       | st the creditor senaratel | v for each claim. For    | each claim listed     |
|        |                 | type of claim it is. If a claim has both  |                              |                    |                     |                           |                          |                       |
|        |                 | the claims in alphabetical order acco<br>n one creditor holds a particular clai |                              |                    | nore than tw        | vo priority unsecured cla | aims, fill out the Conti | nuation Page of Part  |
|        |                 | ·   |                              |                    | hooklot \           |                           |                          |                       |
|        | (For an expla   | nation of each type of claim, see the   | e instructions for this form | in the instruction | bookiet.)           | Total claim               | Priority                 | Nonpriority           |
|        | 7               |   |                              |                    |                     |                           | amount                   | amount                |
| 2.1    |                 | al Revenue Service  | Last 4 digits of             | account number     |                     | \$2,441.00                | \$2,441.00               | \$0.00                |
|        | ,               | Creditor's Name   | When was the d               | leht incurred?     | 2017                |                           |                          |                       |
|        |                 | alized Insolvency Operation   |                              | iobi illouriou .   | 2017                |                           | -                        |                       |
|        |                 | lelphia, PA 19114-0326  |                              |                    |                     |                           |                          |                       |
|        | Number          | Street City State Zlp Code  | As of the date y             | ou file, the clain | i <b>s:</b> Check a | all that apply            |                          |                       |
|        | Who incurr      | ed the debt? Check one.   | ☐ Contingent                 |                    |                     |                           |                          |                       |
|        | Debtor 1        | only  | ☐ Unliquidated               |                    |                     |                           |                          |                       |
|        | Debtor 2        | Ponly   | Disputed                     |                    |                     |                           |                          |                       |
|        |                 | •   | Type of PRIORI               | TY unsecured cl    | aim·                |                           |                          |                       |
|        | _               | and Debtor 2 only   | ☐ Domestic sup               |                    |                     |                           |                          |                       |
|        |                 | one of the debtors and another  |                              | -                  |                     |                           |                          |                       |
|        | ☐ Check if      | f this claim is for a community de  | _                            | rtain other debts  | ,                   | •                         |                          |                       |
|        | Is the claim    | subject to offset?  | ☐ Claims for de              | ath or personal ir | jury while yo       | ou were intoxicated       |                          |                       |
|        | ■ No            |   | Other. Specif                | у                  |                     |                           |                          | _                     |
|        | ☐ Yes           |   |                              |                    |                     |                           |                          | -                     |
| Dos    | 4.0x Lint       | All of Vour MONDDIODITY Uni   | nearwed Claims               |                    |                     |                           |                          |                       |
|        |                 | All of Your NONPRIORITY Uni   |                              |                    |                     |                           |                          |                       |
|        | •               | tors have nonpriority unsecured   |                              |                    |                     |                           |                          |                       |
|        | ☐ No. You h     | ave nothing to report in this part. Su  | ubmit this form to the cour  | rt with your other | schedules.          |                           |                          |                       |
|        | Yes.            |   |                              |                    |                     |                           |                          |                       |
|        |                 |   |                              |                    |                     |                           |                          |                       |
|        |                 | ur nonpriority unsecured claims i<br>aim, list the creditor separately for ea   |                              |                    |                     |                           |                          |                       |
|        |                 | ditor holds a particular claim, list the  |                              |                    |                     |                           |                          |                       |

Total claim

2.

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Case number (f know)

| DCDIO | Diaz, isiliaei   |   |            |
|-------|--|---|------------|
| 4.1   | Advocate Trinity Hospital                                  | Last 4 digits of account number   | \$4,500.00 |
|       | Nonpriority Creditor's Name                                | When was the debt incurred?   |            |
|       | 2020 E 93rd St   | Their was the dest mounted:   |            |
|       | Chicago, IL 60617-3726                                     |   |            |
|       | Number Street City State Zlp Code                          | As of the date you file, the claim is: Check all that apply                             |            |
|       | Who incurred the debt? Check one.                          |   |            |
|       | ■ Debtor 1 only  | ☐ Contingent  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |            |
|       | ☐ Debtor 1 and Debtor 2 only                               | ☐ Disputed  |            |
|       | At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:  |            |
|       | $\square$ Check if this claim is for a community           | ☐ Student loans   |            |
|       | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not         |            |
|       | Is the claim subject to offset?                            | report as priority claims   |            |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                     |            |
|       | Yes  | Other. Specify  |            |
| 4.2   | Capital One  | Last 4 digits of account number   | \$2,459.00 |
|       | Nonpriority Creditor's Name                                |   | • • •      |
|       | 11012 W Brood St   | When was the debt incurred?   |            |
|       | 11013 W Broad St<br>Glen Allen, VA 23060-6017              |   |            |
|       | Number Street City State Zlp Code                          | As of the date you file, the claim is: Check all that apply                             |            |
|       | Who incurred the debt? Check one.                          |   |            |
|       | Debtor 1 only  | ☐ Contingent  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |            |
|       | ☐ Debtor 1 and Debtor 2 only                               | □ Disputed  |            |
|       | ☐ At least one of the debtors and another                  | Type of NONPRIORITY unsecured claim:  |            |
|       | ☐ Check if this claim is for a community                   | ☐ Student loans   |            |
|       | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not         |            |
|       | Is the claim subject to offset?                            | report as priority claims   |            |
|       | No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts             |            |
|       | Yes  | Other. Specify  |            |
| 4.3   | CB/Victorias Secret  | Last 4 digits of account number   | \$1,299.00 |
|       | Nonpriority Creditor's Name                                |   | Ψ1,299.00  |
|       |  | When was the debt incurred?   |            |
|       | PO Box 182128  |   |            |
|       | Columbus, OH 43218-2128  Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply                             |            |
|       | Who incurred the debt? Check one.                          | As of the date you me, the claim is. Oneck an that apply                                |            |
|       | ■ Debtor 1 only  | ☐ Contingent  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |            |
|       | ☐ Debtor 1 and Debtor 2 only                               | ☐ Disputed  |            |
|       | ☐ At least one of the debtors and another                  | Type of NONPRIORITY unsecured claim:  |            |
|       | ☐ Check if this claim is for a community                   | ☐ Student loans   |            |
|       | debt   | $\square$ Obligations arising out of a separation agreement or divorce that you did not |            |
|       | Is the claim subject to offset?                            | report as priority claims   |            |
|       | ■ No   | Debts to pension or profit-sharing plans, and other similar debts                       |            |
|       | ☐ Yes  | Other. Specify  |            |

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| DSNB Macys  | Last 4 digits of account number   | \$1,637.00 |
|---|---|------------|
| Nonpriority Creditor's Name                       | When was the debt incurred?   |            |
| PO Box 8051                                       | when was the debt incurred?   |            |
| Mason, OH 45040-8051                              |   |            |
| Number Street City State ZIp Code                 | As of the date you file, the claim is: Check all that apply                     |            |
| Who incurred the debt? Check one.                 |   |            |
| Debtor 1 only                                     | ☐ Contingent  |            |
| Debtor 2 only                                     | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only                        | ☐ Disputed  |            |
| $\square$ At least one of the debtors and another | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community          | ☐ Student loans   |            |
| debt  | Obligations arising out of a separation agreement or divorce that you did not   |            |
| Is the claim subject to offset?                   | report as priority claims   |            |
| No  | ☐ Debts to pension or profit-sharing plans, and other similar debts             |            |
| Yes   | Other. Specify  |            |
| One Main Financial                                | Last 4 digits of account number   | \$4,800.00 |
| Nonpriority Creditor's Name                       | When was the debt incurred?   |            |
| PO Box 3662                                       | when was the debt incurred?   |            |
| Evansville, IN 47735-3662                         |   |            |
| Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply                     |            |
| Who incurred the debt? Check one.                 |   |            |
| Debtor 1 only                                     | ☐ Contingent  |            |
| Debtor 2 only                                     | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only                        | ☐ Disputed  |            |
| ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community          | ☐ Student loans   |            |
| debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not |            |
| s the claim subject to offset?                    | report as priority claims   |            |
| No  | ☐ Debts to pension or profit-sharing plans, and other similar debts             |            |
| Yes   | Other. Specify  |            |
| Sears/CBNA  | Last 4 digits of account number   | \$2,730.00 |
| Nonpriority Creditor's Name                       | When we she dold incomed?   | •          |
| 13200 Smith Rd                                    | When was the debt incurred?   |            |
| Cleveland, OH 44130-7802                          |   |            |
| Number Street City State Zlp Code                 | As of the date you file, the claim is: Check all that apply                     |            |
| Who incurred the debt? Check one.                 |   |            |
| Debtor 1 only                                     | ☐ Contingent  |            |
| Debtor 2 only                                     | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only                        | ☐ Disputed  |            |
| ☐ At least one of the debtors and another         | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community          | ☐ Student loans   |            |
| debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not |            |
| Is the claim subject to offset?                   | report as priority claims   |            |
| No  | Debts to pension or profit-sharing plans, and other similar debts               |            |
| □ Yes   | Other, Specify  |            |

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| Debtor    | <sup>1</sup> Diaz, Ism            | ael   |  | Case       | number (if know)                      |                           |
|-----------|-----------------------------------|---|--|------------|---------------------------------------|---------------------------|
| 4.7       | SYNCB/WL                          |   | Last 4 digits of account number                                |            |                                       | \$3,054.00                |
|           | Nonpriority Cre                   | ditor's Name  | When was the debt incurred?                                    |            |                                       |                           |
|           | PO Box 960                        | 0024  | mon was the assemblanea.                                       |            |                                       | -                         |
|           | Orlando, Fl                       | L 32896-0024  |  |            |                                       |                           |
| •         |                                   | City State ZIp Code   | As of the date you file, the claim                             | is: Check  | k all that apply                      |                           |
|           | _                                 | the debt? Check one.  |  |            |                                       |                           |
|           | Debtor 1 on                       | ly  | ☐ Contingent   |            |                                       |                           |
|           | Debtor 2 on                       | ly  | ☐ Unliquidated   |            |                                       |                           |
|           | Debtor 1 and                      | d Debtor 2 only   | ☐ Disputed   |            |                                       |                           |
|           | ☐ At least one                    | of the debtors and another                                      | Type of NONPRIORITY unsecure                                   | d claim:   |                                       |                           |
|           | ☐ Check if thi                    | is claim is for a community                                     | ☐ Student loans  |            |                                       |                           |
|           | debt                              |   |  | aration ag | greement or divorce that you did not  |                           |
|           | _                                 | bject to offset?  | report as priority claims                                      |            |                                       |                           |
|           | No                                |   | Debts to pension or profit-shari                               | ng plans,  | and other similar debts               |                           |
|           | Yes                               |   | Other. Specify   |            |                                       | -                         |
| 4.8       | Target/TD                         |   | Last 4 digits of account number                                |            |                                       | \$3,391.00                |
|           | Nonpriority Cre                   | ditor's Name  | - When was the debt incurred?                                  | -          |                                       | ψ3,331.00                 |
|           | PO Box 673                        | 3   |  | -          |                                       | -                         |
|           | Minneapoli                        | s, MN 55440-0673  |  |            |                                       |                           |
|           |                                   | City State Zlp Code   | As of the date you file, the claim                             | is: Check  | k all that apply                      |                           |
|           | _                                 | the debt? Check one.  |  |            |                                       |                           |
|           | Debtor 1 on                       | ly  | ☐ Contingent   |            |                                       |                           |
|           | Debtor 2 on                       | ly  | ☐ Unliquidated   |            |                                       |                           |
|           | Debtor 1 and                      | d Debtor 2 only   | ☐ Disputed   |            |                                       |                           |
|           | ☐ At least one                    | of the debtors and another                                      | Type of NONPRIORITY unsecure                                   | d claim:   |                                       |                           |
|           | ☐ Check if thi                    | is claim is for a community                                     | ☐ Student loans  |            |                                       |                           |
|           | debt<br>Is the claim su           | bject to offset?  | Obligations arising out of a separeport as priority claims     | aration ag | greement or divorce that you did not  |                           |
|           | No                                |   | ☐ Debts to pension or profit-sharing                           | ng plans,  | and other similar debts               |                           |
|           | Yes                               |   | Other. Specify   |            |                                       | -                         |
| Part 3:   | List Others                       | s to Be Notified About a Debt                                   | That You Already Listed  |            |                                       |                           |
|           |                                   |   | out your bankruptcy, for a debt that y                         | ou alrea   | dy listed in Parts 1 or 2. For exampl | e, if a collection agency |
|           |                                   |   | neone else, list the original creditor in                      |            |                                       |                           |
|           |                                   | in Parts 1 or 2, do not fill out or                             | you listed in Parts 1 or 2, list the addi<br>submit this page. | tional cre | editors nere. If you do not have add  | itional persons to be     |
| Dant 4.   | ■ A al al 4la a A a               | manusta fan Faak Tima af Una                                    | a sum ad Olaima  |            |                                       |                           |
| Part 4:   |                                   | mounts for Each Type of Uns                                     |  |            |                                       |                           |
|           | the amounts of<br>f unsecured cla |   | ns. This information is for statistical r                      | eporting   | purposes only. 28 U.S.C. §159. Add    | I the amounts for each    |
|           |                                   |   |  |            | Total Claim                           |                           |
|           | 6a.                               | Domestic support obligations                                    |  | 6a.        | \$ 0.00                               |                           |
| Total cla |                                   |   |  |            |                                       | -                         |
| from Pa   |                                   | Taxes and certain other debts                                   | ,  | 6b.        | \$ 2,441.00                           | _                         |
|           | 6c.                               |   | ijury while you were intoxicated                               | 6c.        | \$ 0.00                               | _                         |
|           | 6d.                               | Other. Add all other priority unse                              | cured claims. Write that amount here.                          | 6d.        | \$                                    | -                         |
|           | 6e.                               | Total Priority. Add lines 6a throu                              | ıgh 6d.  | 6e.        | \$\$                                  | _                         |
|           |                                   |   |  |            | T. (                                  |                           |
|           | 6f.                               | Student loans   |  | 6f.        | Total Claim \$ 0.00                   |                           |
| Total cla | aims                              |   |  |            | ÷                                     | -                         |
| from Pa   | <b>art 2</b> 6g.                  | Obligations arising out of a segou did not report as priority c | paration agreement or divorce that                             | 6g.        | \$ 0.00                               |                           |
|           | 6h.                               |   | ing plans, and other similar debts                             | 6h.        | \$ 0.00                               | -                         |

0.00

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6j.

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> Other. Add all other nonpriority unsecured claims. Write that amount 23,870.00 here.

Total Nonpriority. Add lines 6f through 6i.

23,870.00

Official Form 106 E/F

|                     |                           | DUGIIIIE          | III PAUE / 9 UI 49            |
|---------------------|---------------------------|-------------------|-------------------------------|
| Fill in th          | nis information to identi | fy your case:     |                               |
| Debtor 1            | Ismael Diaz               |                   |                               |
|                     | First Name                | Middle Name       | Last Name                     |
| Debtor 2            |                           |                   |                               |
| (Spouse if, filing) | First Name                | Middle Name       | Last Name                     |
| United States Ba    | ankruptcy Court for the:  | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION |
| Case number         |                           |                   |                               |
| (if known)          |                           |                   |                               |

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | r company with<br>Name, Numbe | n whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 |           |                               |   |                   |   |
|     | Name      |                               |   |                   | <del>_</del>                            |
|     | Number    | Street                        |   |                   | _                                       |
|     | City      |                               | State   | ZIP Code          |   |
| 2.2 |           |                               |   |                   |   |
|     | Name      |                               |   |                   |   |
|     | Number    | Street                        |   |                   |   |
|     | City      |                               | State   | ZIP Code          | <del>_</del>                            |
| 2.3 |           |                               |   |                   |   |
|     | Name      |                               |   |                   | <del>_</del>                            |
|     | Number    | Street                        |   |                   | <u> </u>                                |
|     | City      |                               | State   | ZIP Code          |   |
| 2.4 |           |                               |   |                   |   |
|     | Name      |                               |   |                   | <u> </u>                                |
|     | Number    | Street                        |   |                   | _                                       |
|     | City      |                               | State   | ZIP Code          |   |
| 2.5 |           |                               |   |                   |   |
|     | Name      |                               |   |                   |   |
|     | Number    | Street                        |   |                   | <u> </u>                                |
|     | City      |                               | State   | ZIP Code          | <del>_</del>                            |
|     |           |                               |   |                   |   |

|                 |  | Docume                         | nt Page 30 c            | <u>f 49</u>  |                         |
|-----------------|--|--------------------------------|-------------------------|--|-------------------------|
| F               | ill in this information to identi                                  | fy your case:                  |                         |  |                         |
| Debtor 1        | Ismael Diaz  |                                |                         |  |                         |
| 202101          | First Name   | Middle Name                    | Last Name               |  |                         |
| Debtor 2        | <del></del>  |                                |                         |  |                         |
| (Spouse if, fil | ing) First Name  | Middle Name                    | Last Name               |  |                         |
| United Sta      | ates Bankruptcy Court for the:                                     | NORTHERN DISTRICT              | OF ILLINOIS, EASTER     | N DIVISION   |                         |
| Case num        | her  |                                |                         |  |                         |
| (if known)      |  |                                |                         | □ Cho  | eck if this is an       |
|                 |  |                                |                         | am   | ended filing            |
| O((; - ; -      | I = 400I I   |                                |                         |  |                         |
|                 | I Form 106H  |                                |                         |  |                         |
| Sched           | dule H: Your Cod   | ebtors                         |                         |  | 12/15                   |
|                 |  |                                |                         |  |                         |
| ase numl        | oer (if known). Answer every of you have any codebtors? (If        | question.                      |                         | On the top of any Additional Pages, a codebtor.  | mino your mamo ama      |
| ■ No            |  |                                |                         |  |                         |
|                 | thin the last 8 years, have you<br>rnia, Idaho, Louisiana, Nevada  |                                |                         | ? (Community property states and terrid Wisconsin.)  | tories include Arizona, |
| <b>=</b>        |  |                                |                         |  |                         |
|                 | . Go to line 3.<br>s. Did your spouse, former spou                 | se or legal equivalent live w  | ith you at the time?    |  |                         |
| <b>—</b> 16.    | s. Dia your spouse, former spou                                    | se, or legal equivalent live w | itii you at tile tille: |  |                         |
| line 2          | again as a codebtor only if th<br>, Schedule E/F (Official Form    | at person is a guarantor       | or cosigner. Make sure  | your spouse is filing with you. List of you have listed the creditor on School e Schedule D, Schedule E/F, or School | edule D (Official Form  |
|                 | Column 1: Your codebtor<br>Name, Number, Street, City, State and Z | IP Code                        |                         | Column 2: The creditor to whom Check all schedules that apply:   | you owe the debt        |
| 3.1             |  |                                |                         | ☐ Schedule D, line   |                         |
| 0.1             | Name   |                                |                         | Schedule E/F, line   | -                       |
|                 |  |                                |                         | ☐ Schedule G, line   |                         |
|                 | Number Street  |                                |                         | _  |                         |
|                 | City   | State                          | ZIP Code                |  |                         |
|                 |  |                                |                         |  |                         |
| 3.2             | News   |                                |                         | _ Schedule D, line   | -                       |
|                 | Name   |                                |                         | Schedule E/F, line   |                         |
|                 |  |                                |                         | ☐ Schedule G, line   | -                       |
|                 | Number Street  | State                          | ZIP Code                | _  |                         |

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| Fill   | in this information to identify your ca   | se:                           |                               |              |        | l                       |                        |                          |                        |            |
|--------|---|-------------------------------|-------------------------------|--------------|--------|-------------------------|------------------------|--------------------------|------------------------|------------|
| Deb    | otor 1 Ismael Diaz  |                               |                               |              | _      |                         |                        |                          |                        |            |
|        | otor 2  |                               |                               |              | _      |                         |                        |                          |                        |            |
| Uni    | ted States Bankruptcy Court for the:  | NORTHERN DISTRIC              | CT OF ILLINOIS, EA            | ASTERN       |        |                         |                        |                          |                        |            |
|        | se number<br>own)   |                               | -                             |              |        | □ Ar                    |                        | d filing                 | g postpetition o       | chapter 13 |
| 0      | fficial Form 106I   |                               |                               |              |        | MI                      | M / DD/ Y              | YYY                      |                        |            |
| S      | chedule I: Your Inco  | me                            |                               |              |        |                         |                        |                          |                        | 12/1       |
| spoi   | blying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O  t1: Describe Employment information. | spouse is not filing wit      | h you, do not inclu           | ıde inform   | atio   | n about yo<br>case numl | our spou<br>oer (if kn | se. If more<br>own). Ans | e space is ne          | eded,      |
|        | If you have more than one job,  |                               | ■ Employed                    |              |        |                         | ☐ Emple                |                          | 9 -                    |            |
|        | attach a separate page with information about additional  | Employment status             | ☐ Not employed                | I            |        |                         | □ Not e                | •                        |                        |            |
|        | employers.  | Occupation                    | Batch Maker                   |              |        |                         |                        |                          |                        |            |
|        | Include part-time, seasonal, or self-employed work.   | Employer's name               | Plastics Colo                 | r Corpora    | atio   | <u> </u>                |                        |                          |                        |            |
|        | Occupation may include student or homemaker, if it applies.   | Employer's address            | 14201 Paxton<br>Calumet City, |              | -323   | 35                      |                        |                          |                        |            |
|        |   | How long employed th          | nere? <u>1 yea</u>            | rs and 5     | moı    | nths                    | _                      |                          |                        |            |
| Par    | t 2: Give Details About Mont  | hly Income                    |                               |              |        |                         |                        |                          |                        |            |
|        | mate monthly income as of the dat<br>ss you are separated.  | e you file this form. If y    | ou have nothing to r          | eport for ar | y line | e, write \$0            | in the spa             | ace. Includ              | e your non-filir       | ng spouse  |
| If you | u or your non-filing spouse have more<br>e, attach a separate sheet to this forn  | than one employer, coml<br>า. | oine the information          | for all empl | oyers  | s for that p            | erson on               | the lines b              | elow. If you ne        | ed more    |
|        |   |                               |                               |              |        | For Debt                | or 1                   |                          | btor 2 or<br>ng spouse |            |
| 2.     | List monthly gross wages, salary deductions). If not paid monthly, ca   |                               |                               | 2.           | \$     | 2,4                     | 133.56                 | \$                       | N/A                    |            |
| 3.     | Estimate and list monthly overting  | me pay.                       |                               | 3.           | +\$    |                         | 206.53                 | +\$                      | N/A                    |            |
| 4.     | Calculate gross Income. Add line  | 2 + line 3.                   |                               | 4.           | \$     | 2,64                    | 0.09                   | \$                       | N/A                    |            |

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| Deb | tor 1              | Diaz, Ismael  | _        | Case        | number (if known) |            |                        |      |
|-----|--------------------|---|----------|-------------|-------------------|------------|------------------------|------|
|     |                    |   |          | For         | Debtor 1          | For Deb    | tor 2 or               |      |
|     | Col                | py line 4 here  | 4.       | \$          | 2,640.09          | \$         | N/A                    |      |
| 5.  | List               | t all payroll deductions:   |          |             |                   |            |                        |      |
|     | 5a.                | Tax, Medicare, and Social Security deductions   | 5a.      | \$          | 323.57            | \$         | N/A                    |      |
|     | 5b.                | Mandatory contributions for retirement plans  | 5b.      | <u> </u>    | 0.00              | \$         | N/A                    |      |
|     | 5c.                | Voluntary contributions for retirement plans  | 5c.      | \$_         | 0.00              | \$         | N/A                    |      |
|     | 5d.                | Required repayments of retirement fund loans  | 5d.      | \$          | 0.00              | \$         | N/A                    |      |
|     | 5e.                | Insurance   | 5e.      | \$_         | 44.20             | \$         | N/A                    |      |
|     | 5f.                | Domestic support obligations  | 5f.      | \$          | 0.00              | \$         | N/A                    |      |
|     | 5g.                | Union dues  | 5g.      | \$_         | 0.00              | \$         | N/A                    |      |
|     | 5h.                | Other deductions. Specify:  | 5h.+     | \$          | 0.00              | + \$       | N/A                    |      |
| 6.  | Add                | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.       | \$          | 367.77            | \$         | N/A                    |      |
| 7.  | Cal                | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       | \$          | 2,272.32          | \$         | N/A                    |      |
| 8.  | List<br>8a.        | t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a.      | \$          | 0.00              | \$         | N/A                    |      |
|     | 8b.                | Interest and dividends  | 8b.      | \$_         | 0.00              | \$         | N/A<br>N/A             |      |
|     | 8c.                | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  |          | \$<br>\$    | 0.00              | \$\$       | N/A                    |      |
|     | 8d.                | Unemployment compensation   | 8d.      | <u> </u>    | 0.00              | \$         | N/A                    |      |
|     | 8e.                | Social Security   | 8e.      | <u>\$</u> — | 0.00              | \$         | N/A                    |      |
|     | 8f.                | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:           | 8f.      | * <u>—</u>  | 0.00              | \$         | N/A                    |      |
|     | 8g.                | Pension or retirement income  | —<br>8g. | \$_         | 0.00              | \$         | N/A                    |      |
|     | 8h.                | Other monthly income. Specify:  | 8h.+     | \$          | 0.00              | + \$       | N/A                    |      |
| 9.  | Add                | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.       | \$          | 0.00              | \$         | N/A                    |      |
| 10. |                    | culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10. \$   |             | 2,272.32 + \$_    | N          | /A = \$ 2,272          | 2.32 |
| 11. | Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not avaicify:     | ependen  |             |                   | Schedule J |                        | 0.00 |
| 12. |                    | d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain   |          |             | •                 |            | 2. \$ <b>2,27</b> 2    | 2.32 |
| 13. | Do                 | you expect an increase or decrease within the year after you file this form'  | ?        |             |                   |            | Combined monthly incom | ne   |
|     | _                  | Voc Evoloin:  |          |             |                   |            |                        |      |

Official Form 106I Schedule I: Your Income page 2

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| Fill in                    | this information to identify y  | your case:   |                       |                  |                 |   |
|----------------------------|---|--|-----------------------|------------------|-----------------|---|
| Debto                      | r 1 Ismael Diaz   | 2  |                       |                  | if this is:     |   |
| Debto<br>(Spou             | r 2<br>se, if filing)   |  |                       |                  | ŭ               | ing postpetition chapter 13 following date: |
| United                     | d States Bankruptcy Court for th  | e: NORTHERN DISTRICT OF ILLINGEASTERN DIVISION   | OIS,                  | <u></u>          | /M / DD / YYYY  |   |
| Case (If kno               | number<br>wn)   |  |                       |                  |                 |   |
|                            | icial Form 106J   |  |                       |                  |                 |   |
|                            | hedule J: Your  | Expenses s possible. If two married people are   | filing to mathem that |                  |                 | 12/15                                       |
| infori<br>(if kn<br>Part 1 | mation. If more space is no own). Answer every quest limit Describe Your House is this a joint case?  No. Go to line 2. | eeded, attach another sheet to this fo   |                       |                  |                 |   |
|                            | □ No  | in a separate household?  ust file Official Form 106J-2, Expenses in                                       | for Separate Househo  | oldof Debtor 2   | 2.              |   |
| 2.                         | Do you have dependents?   | ' □ No   | ,                     |                  |                 |   |
|                            | Do not list Debtor 1 and Debtor 2.  | Yes. Fill out this information for each dependent  | Dependent's relation  |                  | Dependent's age | Does dependent live with you?               |
|                            | Do not state the dependents names.  |  | Daughter              |                  | 8               | □ No ■ Yes □ No                             |
|                            |   |  | Significant Oth       | ner              | 27              | ■ Yes □ No □ Yes □ No                       |
|                            | Do your expenses include<br>expenses of people other<br>yourself and your depend  | than   |                       |                  |                 | ☐ Yes                                       |
| expe                       | nate your expenses as of y  | oing Monthly Expenses<br>your bankruptcy filing date unless yo<br>bankruptcy is filed. If this is a supple |                       |                  |                 |   |
| value                      |   | non-cash government assistance if ave included it on Schedule I: Your I                                    |                       |                  | Your expe       | enses                                       |
|                            | The rental or home owner payments and any rent for the  | ship expenses for your residence. In<br>e ground or lot.   | clude first mortgage  | 4. \$            |                 | 700.00                                      |
| I                          | If not included in line 4:  |  |                       |                  |                 |   |
|                            | 4a. Real estate taxes   |  |                       | 4a. \$           |                 | 0.00  |
|                            |   | s, or renter's insurance   |                       | 4b. \$           |                 | 0.00  |
|                            |   | repair, and upkeep expenses ation or condominium dues  |                       | 4c. \$<br>4d. \$ |                 | 0.00  |
|                            |   | nents for your residence, such as hom  | ne equity loans       | 5. \$            |                 | 0.00  |

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| Debtor 1         | Diaz, Ismael  | Case number (if known)             |                      |
|------------------|---|------------------------------------|----------------------|
| 6. <b>Util</b> i | lities:   |                                    |                      |
| 6a.              | Electricity, heat, natural gas  | 6a. \$                             | 200.00               |
| 6b.              |   | 6b. \$                             | 55.00                |
| 6c.              | Telephone, cell phone, Internet, satellite, and cable services  | 6c. \$                             | 230.00               |
| 6d.              | •   | 6d. \$                             |                      |
|                  | · · · · · · · · · · · · · · · · · · ·   | · ·                                | 0.00                 |
|                  | od and housekeeping supplies  | 7. \$                              | 650.00               |
|                  | ildcare and children's education costs  | 8. \$                              | 0.00                 |
|                  | thing, laundry, and dry cleaning  | 9. \$                              | 100.00               |
|                  | sonal care products and services  | 10. \$                             | 40.00                |
| 1. Med           | dical and dental expenses   | 11. \$                             | 30.00                |
|                  | Insportation. Include gas, maintenance, bus or train fare. not include car payments.  | 12. \$                             | 200.00               |
|                  | tertainment, clubs, recreation, newspapers, magazines, and b  | ·                                  | 0.00                 |
|                  | aritable contributions and religious donations  | 14. \$                             | 0.00                 |
|                  | urance.   | ιτ. ψ                              | 0.00                 |
|                  | not include insurance deducted from your pay or included in lines   | s 4 or 20                          |                      |
|                  | a. Life insurance   | 15a. \$                            | 0.00                 |
|                  | b. Health insurance   | 15b. \$                            | 0.00                 |
|                  | c. Vehicle insurance  | 15c. \$                            | 65.00                |
|                  |   |                                    |                      |
|                  | d. Other insurance. Specify:  |                                    | 0.00                 |
| Spe              | kes. Do not include taxes deducted from your pay or included in line ecify:   | es 4 or 20.<br>16. \$              | 0.00                 |
|                  | tallment or lease payments: a. Car payments for Vehicle 1   | 17a. <b>\$</b>                     | 0.00                 |
|                  | o. Car payments for Vehicle 2   | 17b. \$                            | 0.00                 |
|                  | Other Specific  |                                    |                      |
|                  | c. Other. Specify:  | · ·                                | 0.00                 |
|                  | d. Other. Specify:  | 17d. \$                            | 0.00                 |
|                  | ur payments of alimony, maintenance, and support that you o   |                                    | 0.00                 |
|                  | ducted from your pay on line 5, Schedule I, Your Income (Offic<br>her payments you make to support others who do not live wit |                                    | 0.00                 |
|                  | ecify:  | 19.                                | 0.00                 |
|                  | ner real property expenses not included in lines 4 or 5 of this   |                                    |                      |
|                  | a. Mortgages on other property  | 20a. \$                            | 0.00                 |
|                  | o. Real estate taxes  | 20b. \$                            | 0.00                 |
|                  | c. Property, homeowner's, or renter's insurance   | 20c. \$                            | 0.00                 |
|                  |   | 20d. \$                            |                      |
|                  | d. Maintenance, repair, and upkeep expenses   | ·                                  | 0.00                 |
|                  | e. Homeowner's association or condominium dues  | 20e. \$                            | 0.00                 |
| 1. <b>O</b> th   | ner: Specify:   | 21+\$                              | 0.00                 |
| 2. <b>Cal</b>    | culate your monthly expenses  |                                    |                      |
| 22a              | a. Add lines 4 through 21.  | \$                                 | 2,270.00             |
| 22b              | o. Copy line 22 (monthly expenses for Debtor 2), if any, from Office  | ial Form 106J-2                    |                      |
|                  |   | \$                                 | 2 270 00             |
| 220              | a. Add line 22a and 22b. The result is your monthly expenses.   | Ψ                                  | 2,270.00             |
|                  | culate your monthly net income.   |                                    |                      |
| 23a              | a. Copy line 12 (your combined monthly income) from Schedule I  | . 23a. \$                          | 2,272.32             |
| 23b              | o. Copy your monthly expenses from line 22c above.  | 23b\$                              | 2,270.00             |
| 00-              | Cultivativativa monthly among a form and the interest   |                                    |                      |
| 230.             | <ul> <li>Subtract your monthly expenses from your monthly income.</li> <li>The result is your monthly net income.</li> </ul>  | 23c. \$                            | 2.32                 |
| 4. <b>Do</b> v   | you expect an increase or decrease in your expenses within  | the year after you file this form? |                      |
|                  | example, do you expect to finish paying for your car loan within the year of  |                                    | ecrease because of a |
|                  | dification to the terms of your mortgage?   | ,                                  |                      |
|                  | , 55  |                                    |                      |
| <b>I</b>         | No.   |                                    |                      |

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| Fill in this                    | s information to identify yo   | our case:                 |  |                           |   |
|---------------------------------|--|---------------------------|--|---------------------------|---|
| Debtor 1                        | Ismael Diaz  |                           |  |                           |   |
|                                 | First Name   | Middle Name               | Last Name  |                           |   |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name               | Last Name  |                           |   |
| United States                   | Bankruptcy Court for the:  | NORTHERN DISTRICT         | OF ILLINOIS, EASTERN [                                 | OIVISION                  |   |
| Case number (if known)          |  |                           |  |                           | ☐ Check if this is an amended filing                                |
| Official Fo                     | orm 106Dec   |                           |  |                           |   |
| Declara                         | ation About a  | an Individual             | <b>Debtor's Sc</b>                                     | hedules                   | 12/15   |
| obtaining mor<br>years, or both | this form whenever you fil<br>ney or property by fraud in<br>n. 18 U.S.C. §§ 152, 1341, 19<br>Sign Below | n connection with a bankr | or amended scriedules. M<br>uptcy case can result in f | ines up to \$250,000, or  | imprisonment for up to 20   |
| Did you                         | pay or agree to pay some   | one who is NOT an attorn  | ey to help you fill out bar                            | nkruptcy forms?           |   |
| ■ No                            |  |                           |  |                           |   |
| ☐ Yes                           | s. Name of person  |                           |  |                           | otcy Petition Preparer's Notice,<br>d Signature (Official Form 119) |
|                                 | enalty of perjury, I declare tare true and correct.  | that I have read the sumn | nary and schedules filed v                             | with this declaration and | d   |
| X /s/ Is                        | smael Diaz   |                           | X  |                           |   |
| Isma                            | ael Diaz<br>ature of Debtor 1  |                           | Signature of D   | Debtor 2                  |   |

Date \_\_\_\_

Date May 11, 2018

| Fill in this infor                      | mation to identify your c            | ase:                     |  |                |  |
|---|--------------------------------------|--------------------------|--|----------------|--|
| Debtor 1                                | Ismael Diaz                          |                          |  |                |  |
| Dahtar 3                                | First Name                           | Middle Name              | Last Name  | <del></del> }  |  |
| Debtor 2<br>(Spouse if, filing)         | First Name                           | Middle Name              | Last Name  |                |  |
| United States Ba                        | ankruptcy Court for the:             | NORTHERN DISTRICT        | OF ILLINOIS, EASTERN DIVISION                                  |                |  |
| Case number                             |                                      |                          |  | l              |  |
| (if known)                              |                                      |                          |  |                | Check if this is an<br>amended filing                      |
| Official Forn                           | n 106Dec                             |                          |  |                |  |
|   |                                      | n Individual             | Debtor's Schedu  | ıles           | 12/15  |
| •                                       | 8 U.S.C. §§ 152, 1341, 15<br>1 Below |                          |  |                |  |
| Did you pay                             | y or agree to pay someo              | ne who is NOT an attorn  | ey to help you fill out bankruptcy f                           | orms?          |  |
| <b>™</b> No                             |                                      |                          |  |                |  |
| ☐ Yes. N                                | lame of person                       |                          |  |                | Petition Preparer's Notice,<br>Inature (Official Form 119) |
| that they are  X <u>/s/ lsma</u> Ismael | e true and correct.                  | nat I have read the sumn | nary and schedules filed with this d  X  Signature of Debtor 2 | eclaration and | ······································                     |
| Date N                                  | lay 11, 2018                         |                          | Date   |                |  |

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Page 37 of 49 Document Fill in this information to identify your case: Debtor 1 **Ismael Diaz** Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pai | t 1: Summarize Your Assets  |                    |                            |
|-----|---|--------------------|----------------------------|
|     |   | Your as            | sets<br>what you own       |
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B  | \$                 | 0.00                       |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$                 | 1,550.00                   |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$                 | 1,550.00                   |
| Pai | tt 2: Summarize Your Liabilities  |                    |                            |
|     |   | Your lia<br>Amount | <b>bilities</b><br>you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D  | \$                 | 0.00                       |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F   | \$                 | 2,441.00                   |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F  | \$                 | 23,870.00                  |
|     | Your total liabilities  | \$                 | 26,311.00                  |
| Pai | t 3: Summarize Your Income and Expenses   |                    |                            |
| 4.  | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I  | \$                 | 2,272.32                   |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$                 | 2,270.00                   |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records  |                    |                            |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your or the | ther schedule      | <del>9</del> S.            |
| 7.  | ■ Yes What kind of debt do you have?  |                    |                            |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.  | ersonal, fam       | ily, or household          |
|     | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this be   | ox and subm        | it this form to the        |

court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11: <b>OR</b> . Form 122B Line 11: <b>OR</b> . Form 122C-1 Line 14.                              |

2,645.76 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total c | laim     |
|--|---------|----------|
| From Part 4 on Schedule E/F, copy the following:   |         |          |
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 2,441.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00     |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 2,441.00 |

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| Fill in th                      | nis information to ident  | ifv vour case:   |  |   |                                       |  |
|---------------------------------|---|--|--|---|---------------------------------------|--|
| Debtor 1                        | Ismael Diaz   | ,,   |  |   |                                       |  |
| Debior 1                        | First Name  | Middle Name  | Last Name                              |   |                                       |  |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name  | Last Name                              |   |                                       |  |
| United States B                 | Sankruptcy Court for the:   | NORTHERN DISTRICT (  | OF ILLINOIS, EASTERN DIV               | /ISION  |                                       |  |
| Case number                     |   |  |  |   |                                       |  |
| (if known)                      |   |  |  | -   | Check if this is an<br>amended filing |  |
| O(;; ; ) E                      | 407   |  |  |   |                                       |  |
| Official Fo<br>Statemen         |   | Affairs for Individ  | luals Filing for E                     | Bankruptcv  | 4/1                                   |  |
| Be as complete                  | and accurate as possil  | ole. If two married people are   | e filing together, both are            | equally responsible for suppl                                   | ying correct                          |  |
|                                 | more space is needed, wer every question.                                       | attach a separate sheet to th  | is form. On the top of any             | additional pages, write your                                    | name and case numbe                   |  |
| Part 1: Give                    | e Details About Your Ma   | rital Status and Where You   | Lived Before                           |   |                                       |  |
| 1. What is yo                   | our current marital statu   | s?   |  |   |                                       |  |
| ☐ Marrie                        | ed  |  |  |   |                                       |  |
| ■ Not m                         |   |  |  |   |                                       |  |
| 2. During the                   | During the last 3 years, have you lived anywhere other than where you live now? |  |  |   |                                       |  |
| _                               | , , , ,   | ,  |  |   |                                       |  |
| □ No<br>■ Yes. L                | ist all of the places you liv   | ved in the last 3 years. Do not i  | nclude where you live now.             |   |                                       |  |
|                                 | Prior Address:  | Dates Debtor 1 there   |  | ddress:   | Dates Debtor 2<br>lived there         |  |
|                                 | Avenue N<br>, IL 60617  | From-To:<br><b>05/2015 - 07/2</b>  | ☐ Same as Debtor                       | 1   | ☐ Same as Debtor 1 From-To:           |  |
|                                 |   |  |  | ity property state or territory<br>ico, Texas, Washington and W |                                       |  |
| _                               | ones include Anzona, Cal  | nomia, idano, Louisiana, Nev   | ada, New Mexico, i deito it            | co, rexas, washington and w                                     | 1300113111.)                          |  |
| ■ No<br>□ Yes. N                | Make sure you fill out <i>Sch</i>   | edule H: Your Codebtors (Offic   | cial Form 106H).                       |   |                                       |  |
|                                 | ·   | · ·  | 3.3.1. 6 1.66.1,1                      |   |                                       |  |
| Part 2 Expl                     | ain the Sources of You  | r Income   |  |   |                                       |  |
| Fill in the to                  | otal amount of income yo  | nployment or from operating<br>u received from all jobs and a<br>lave income that you receive to | ll businesses, including part          |   | dar years?                            |  |
| ■ No                            |   |  |  |   |                                       |  |
| _                               | Fill in the details.  |  |  |   |                                       |  |
|                                 |   | Debtor 1   |  | Debtor 2  |                                       |  |
|                                 |   | Sources of income Check all that apply.  | Gross income<br>(before deductions and | Sources of income Check all that apply.                         | Gross income<br>(before deductions    |  |
|                                 |   | «PP-)  | exclusions)                            |   | and exclusions)                       |  |

Case 18-15842 Doc 1 Filed 05/31/18 Entered 05/31/18 23:47:39 Desc Main Document Page 40 of 49 Case number (if known) Debtor 1 Diaz, Ismael Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment Total amount Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider.

**Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe

Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8.

Include payments on debts guaranteed or cosigned by an insider.

Nο

Yes. List all payments to an insider

Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment paid still owe Include creditor's name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, Case 18-15842 Doc 1 Filed 05/31/18 Entered 05/31/18 23:47:39 Desc Main Document Page 41 of 49

Case number (if known) Debtor 1 Diaz, Ismael and contract disputes. No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Nο Yes. Fill in the details for each gift. Dates you gave Gifts with a total value of more than \$600 per Describe the gifts Value person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Value Dates you contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

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Document Page 42 of 49 Case number (if known) Debtor 1 Diaz, Ismael consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment or Amount of transferred transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 4/2018 Chicago Legal, LLC \$1,565.00 903 Commerce Dr Ste 165 Oak Brook, IL 60523-8727 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of transferred transfer was Address payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Rose Cerda 1997 Subaru 168000 March 2018 does not pass emissions Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. 

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

Case 18-15842 Filed 05/31/18 Entered 05/31/18 23:47:39 Document Page 43 of 49 Debtor 1 Case number (if known) Diaz, Ismael 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Describe the contents Name of Financial Institution Who else had access to it? Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Owner's Name Describe the property Value Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Governmental unit Environmental law, if you Date of notice Name of site Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice

Doc 1

Address (Number, Street, City, State and

ZIP Code)

know it

Desc Main

Address (Number, Street, City, State and ZIP Code)

Case number (if known) Debtor 1 Diaz, Ismael 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ismael Diaz Signature of Debtor 2 **Ismael Diaz** Signature of Debtor 1 Date Date May 11, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B201B (Form 201B) (12/09)

### United States Bankruptcy Court Northern District of Illinois, Eastern Division

| IN RE:   | Case No.  |  |  |
|--|---|--|--|
| Diaz, Ismael   | Chapter 7   |  |  |
| Debtor(s)  |   |  |  |
|  | F NOTICE TO CONSUMER DEBTOR(S) b) OF THE BANKRUPTCY CODE              |  |  |
| Certificate of [Non-   | Attorney] Bankruptcy Petition Preparer                                |  |  |
| I, the [non-attorney] bankruptcy petition preparer signin notice, as required by § 342(b) of the Bankruptcy Code.  | g the debtor's petition, hereby certify that I delivered              | d to the debtor the attached   |  |
| Printed Name and title, if any, of Bankruptcy Petition Pr<br>Address:  | petition prepared the Social Secur principal, respon the bankruptcy p | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) |  |
| x  | (Required by 11   | U.S.C. § 110.)   |  |
| X Signature of Bankruptcy Petition Preparer of officer, pri partner whose Social Security number is provided above | ncipal, responsible person, or  |  |  |
| Ce   | ertificate of the Debtor  |  |  |
| I (We), the debtor(s), affirm that I (we) have received an   | d read the attached notice, as required by § 342(b) of                | of the Bankruptcy Code.  |  |
| Diaz, Ismael   | X /s/ Ismael Diaz   | 5/11/2018  |  |
| Printed Name(s) of Debtor(s)   | Signature of Debtor   | Date   |  |
|  |   |  |  |
| Case No. (if known)  | X Signature of Joint Debtor (if any)                                  |  |  |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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